STAFFORD RURAL DISTRICT COUNCIL



of the

Medical Officer of Health

Chief Sanitary Inspector

For the year 1943

JULY 1944

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Annual Report

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Medical Officer of Health

and the

Chief Sanitary Inspector

For the year 1943

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ANNUAL REPORT

Public Health Department,
7, St. Mary's Grove,
Stafford.

July, 1944.

To the Chairman and Members of the Stafford Rural District Council.

LADIES AND GENTLEMEN,

I have the honour of submitting to you the Annual Report for the Year 1943.

The report has been prepared in compliance with the recommendations of the Ministry of Health. This year, once more, for reasons of security, certain information relating to Vital Statistics has been omitted. Nothing has occurred in the area during the year which would make one suppose that there has been any general decline in the health of the inhabitants after some years of war-time conditions.

Much of the information given in the body of the report has been prepared by the Chief Sanitary Inspector, Mr. G. M. Lawton, and I would desire to express my gratitude for his valuable assistance in this connection.

After 37 years' service as Surveyor and Sanitary Inspector to the Stafford R.D.C., Mr. J. W. Cook passed away on 9th September, 1943, after many months of illness which he bore with patient fortitude. Members of the Council have, elsewhere, paid glowing tributes to his technical capabilities and personal character during his long period as the Council's servant. I would record here my most grateful thanks for his generous advice and assistance to me in the Public Health Work of the area since I took up the appointment of Medical Officer of Health.

During Mr. Cook's illness and subsequent death the Public Health Department was consequently short-staffed, but the more essental work of the Department was carried out without interruption.

The Chief Sanitary Inspector and I wish to thank the Chairman and Members of the Public Health Committee for their courtesy and help during 1943.

I am, Ladies and Gentlemen,
Your obedient Servant,
ALEXANDER THOMSON.

Public Health Committee, 1943.

Chairman—Councillor A. J. Bourne; Vice-Chairman—Councillor H. C. Plant; Members—Councillors J. Gough (Chairman of the Council), A. Billington, J. W. Bourne, J. C. Holme, A. J. James, P. Kemp, R. Knobbs, W. Martin, S. Robinson, C. W. Stubbs, W. Turner, W. Wint, Revd. C. G. Wright, and S. L. Everitt.

Public Health Officers.

Medical Officer of Health.—A. Thomson, M.B., Ch.B., D.P.H. (Edin.).

Chief Sanitary Inspector (up to September, 1943).—J. W.

COOK, M.R.S.I., M.S.I.A.—Certified Food Inspector.

Chief Sanitary Inspector (as from October, 1943).—G. M. LAWTON, M.R.S.I., M.S.I.A.—Certified Food Inspector.

General Statistics, Social Conditions, and Health Services in the Area.

Area (in acres)						80,249
No. of inhabited houses					• •	3,913
Rateable value		•	• •	• •		£71,202
Sum represented by a penny r	rate .	•	• •	• •		£288

The employed residents of the area are normally mainly engaged in agriculture, dairy farming and allied occupations, but a substantial number who live in the Rural District are employed in Stafford where the chief peace-time industries are Engineering and Boot and Shoe Manufacturing.

Vital Statistics for the Year 1943.

In 1943 the Live Birth-Rate per 1,000 of the civilian population was 21.1 Live Birth-Rate per 1,000

Year.			Population.
1943			 $2\overline{1}.1$
1942	• •	• •	 19.3
1941		• •	 17.9
1940			 16.8
1939			15.1

The Still-Birth Rate per 1,000 of the civilian population was 0.55 in 1943, compared with rates of 0.61, 0.80, and 0.95 in 1942, 1941, and 1940 respectively.

During 1943 the rate of Illegitimate to Legitimate births was

1 to 16, compared with 1 to 36 in 1942 and 1 to 23 in 1941.

In the following table comparative figures for Live and Still births are shown for England and Wales:—

Year.

Live Birth-Rate per 1,000
Civilian Population.
Stafford R.D. England & Wales.

1943 21.1 16.5
1942 19.3 15.8

Still Birth-Rate per 1,000 Civilian Population.

1943	 	 0.55	0.51
1942	 • •	 0.61	0.54

Deaths.

In 1943 the Death-Rate per 1,000 of the Civilian Population was 12.9, compared with a Rate of 12.1 for England and Wales.

Death-Rate per 1,000 Civilian Population.

Year.			Stafford R.D.	England & Wales.
1943	• •	 	12.9	12.1
1942		 	10.5	11.6

In the Stafford R.D. in 1943 the excess of Live Births over Total Deaths was 118. In 1943 the Death-Rate of children under 1 year of age per 1,000 Live Births was 69, compared with 49 for England and Wales.

Deaths from Selected Causes, 1943.

Deaths from Selected Causes, 1943.											
Cause of Death.	Males.	Females.	Totals.								
Typhoid and Para-Typhoid Fevers											
Cerebro-Spinal Fever											
Scarlet Fever		_									
Whooping Cough		_									
Diphtheria											
Tuberculosis of Respiratory System	4	1	5								
Other Forms of Tuberculosis		1	1								
Syphilitic Diseases		. —									
Influenza	5	2	7								
Measles	_	_									
Acute Polio-Myelitis and Polio Enceph-											
alitis											
Cancer (all Sites)		10	19								
Intra-Cranial Vascular Lesions	. 9	10	19								
Heart Disease	. 18	24	42								
Other Diseases of Circulatory System.		3	7								
Bronchitis		6	11								
Pneumonia	1	2	10								
Other Respiratory Diseases			1								
Diarrhoea under 2 years	. 1	1	2								
Other Digestive Disorders	$\begin{bmatrix} 2 \\ 3 \end{bmatrix}$	1	3								
Nephritis	. 3		3								
Maternal Causes	1	9	2								
Prematurity, Birth Injuries, etc.	5 2	9	14								
Road Traffic Accidents	. 2	3	5								
	1										

Vital Statistics, 1943 (England and Wales).

In 1943 the excess of live births over total deaths registered in England and Wales was 181,127. The corresponding excess for the preceding year was 173,902, and the average annual national increase for 1937—41 was 88,036.

The Birth-Rate for 1943 was 0.7 above that for 1942, and was the highest recorded since 1928. The Death-Rate was 0.5 higher than 1942, but 0.8 lower than that for 1941. The Infant Mortality Rate was the lowest recorded—2 per 1,000 below that for 1942, the previous lowest. The proportion of still-births to total births was the lowest recorded.

Laboratory Facilities, Ambulance Facilities, Nursing in the Home, Treatment Centres and Clinics, Public and Voluntary Hospitals.

No important developments or alterations have been made in the services provided in the district under the above heads.

The Medical Practitioners in the area took full advantage of the facilities offered to them at the County Bacteriology Department for examination of Throat Swabs, Sputum Tests, Blood Tests, etc.

The Welfare Centres at Berkswich, Gnosall and Great Haywood, carried on by the County Council, were well attended. The County Health Visitors again did much good work towards the welfare of children and mothers in the area.

Mid-Staffordshire Joint Hospital Board.

As the Councillors will be much interested in the work of the Mid-Staffordshire Joint Hospital Board, of which the Stafford Rural District Council is a Constituent Authority, I have given the following information culled from the pages of that body's Annual Report.

The Mid-Staffordshire Joint Hospital Board publishes an Annual Report covering the period of 1st April in one year to the 31st March in the following year. A rate of $2\frac{1}{2}d$. in the £ was levied for the year, the policy of the Board being to meet items of capital expenditure from revenue in preference to raising a number of small loans. Severe shortage of Nursing and Domestic Staff was experienced during the year. Over 14,000 miles were travelled in the year by ambulances hired by the Board.

The representatives of the Stafford Rural District Council on the Board are Councillor Miss V. H. Hargreaves, J.P., C.C., and Councillor D. H. T. Smith.

Constituent Authorities of the Mid-Staffordshire Joint Hospital Board.

Authority.	Estimated Population, 1942.	Rateable Value, 1st April, 1942.	Percentage of Whole Rateable Value.
Aldridge U.D Brownhills U.D Cannock R.D Cannock U.D Lichfield City Lichfield R.D Rugeley U.D Stafford Borough Stafford R.D Tutbury R.D Uttoxeter R.D Uttoxeter U.D	22,640 19,480 21,580 36,520 10,500 32,150 7,917 35,320 13,690 13,380 9.960 7.060	£116,387 £64,954 £88,203 £156,941 £55,737 £157,375 £33,157 £216,712 £71,584 £72,980 £28,103 £35,949	% 10.6 5.92 8.03 14.29 5.08 14.33 3.02 19.73 6.52 6.65 2.56 3.27
Totals	230,197	£1,098,082	100

Hospitals of the Board.

Cheslyn Hay Hospital.	Tithe Barn Hospital, Stafford.	Wissage Hospital.		
12	16	30		
12	14	30		
1	6	, 10		
25	36	70		
	12 12 1	12 16 12 14 1 6		

Table showing total cases admitted from each Constituent District during year ended 31st March, 1943.

Authority.	Diphtheria.	Scarlet Fever.	Other Diseases.	Total.
Aldridge U.D. Brownhills U.D. Cannock U.D. Cannock R.D. Lichfiels City Lichfield R.D. Rugeley U.D. Stafford Borough Stafford R.D. Tutbury R.D. Uttoxeter U.D. Uttoxeter U.D. Uttoxeter R.D. Other sources (including H.M. Forces, etc.)	29 77 150 33 31 32 36 23 8 14 1 — 13	74 80 49 85 20 88 12 80 13 25 11 9	7 2 4 1 1 6 4 8 11 — 1 36	110 159 203 119 52 126 52 111 32 39 12 10 62
Totals	447	559	81	1,087
Deaths Total Patient Days Average Stay (Days)	19 (4.25%) 12,971 29	1 (0.18%) 16,168 29	7 (8.6%) 1,243 28	27 (2.5%) 30,382 —
Total Beds	56	58	17	per 1,750 of popula- tion.

Cases admitted to the Hospitals of the Joint Board from the Stafford Rural area during year ended 31st March, 1943.

Hospital.	Scarlet Fever.	Diphtheria.	Other Diseases.	Totals.
Cheslyn Hay Hospital				
Tithe Barn Hospital, Stafford	8	6	7	21
Wissage Hospital	4	2	4	10
Cases admitted to "outside" Hospitals	1			1

The Incidence of Infectious Diseases in 1943, compared with the two previous years, is shown below in tabular form.

Disease.	1943.	1942.	1941.
Scarlet Fever	 . 59	18	19
Whooping-Cough	 . 78	22	71
Diphtheria	 . 4	5	3
Erysipelas	 . 2	9	1
Measles	 . 110	10	162
Pneumonia	 . 6	12	18
Puerperal Pyrexia	 . 1	4	1
Cerebro-Spinal Fever	 	3	3
Dysentery	 . 2		
· ·	1		

During 1943, 42 cases of Scarlet Fever and 4 cases of Diphtheria were isolated in Hospital. No deaths occurred from either of these diseases.

Age-Incidence of Infectious Diseases, 1943.

	ntery.	E			1	-	1		pool	1	1	61
	Dysentery.	M.			l	1					1	1
	nonia.	H.	1	1			p-d	1	1	1	1	61
	Pneumonia.	M.		1	=	ļ		1		H		4
	ping- gh.	F	က	28	10		1	1				41
	Whooping- Cough.	M.	2	22	11	2	1	1	1	1		37
	les.	H.		36	19	4	1	1	1	1	1	09
	Measles.	M.		25	22					1	1	20
	Diphtheria.	Ħ.				1		=	Н		1	63
		M.				1	Ħ	1	1	Ħ	1	67
	Scarlet Fever.	F.	Н	9	11	က	=	H	1			23
	Sc	M.		16	16	က	-	1	1			36
			•	•	•	•	•	•	•	•	•	:
	ŭ	ů Ž	:	:	•	•	į	•	•	•	•	:
	AGE-GROUPS.		Inder 1 year	1—5 years	6—10 years	11—15 years	16—20 years	21—30 years	31—50 years	51—70 years	Over 70 years	Totais

Pneumonia. O 9 O Dysentery. O 0 Infectious Diseases Notifications, 1943, showing Months of Occurrence. Whooping-Cough. 18 9 9 70 21 ∞ ∞ 70 9 Measles. 12 33 22 110 37 9 O Diphtheria. 0 4 Scarlet Fever. 10 59 70 ∞ O Month. Totals September November August ... March ... December February October January June April July May

Names of Parishes showing Number of Houses (including Farmhouses) and Incidence of Infectious Diseases in each Parish in 1943.

Pneumonia.	9	
Whooping Cough.		
Measles.	30 20 27 27 28 14 10 110	
Diphtheria.		
Scarlet Fever.	8 41 8 1 2 2 2 1 4	
Number of Houses.	160 331 882 1445 176 425 186 180 180 180 180 81 81 81 81 81 81 81 81 81 81 81 81 81	
- Li		
Paris	Coton on s	
Name of Parish.	Adbaston Baswich Bradley Brocton Castle Church Colwich Creswell Frorton Fradswell Forton Gayton Gayton Ghosall Haughton and Colngestre Marston Norbury Ranton Salt and Enson Seighford Stowe Tixall Weston Whitgreave	
	1984731-80015244731-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	

It will be noted that in 1943 there was an increase in the num ber of cases of Scarlet Fever in the Stafford R.D. The increase was fairly general throughout the country. War-time conditions

provide more opportunities for spread of the disease.

Scarlet Fever is a disease of temperate climates, and is endemic (i.e., prevailing in the country concerned), with a tendency to epidemic occurrence every 4—6 years. Most cases occur between 1 and 15 years of age, very few cases occurring over 35 years. The disease is said to be more prevalent when rainfall is below average and vice-versa. While the incidence of Scarlet Fever has not declined over the past years, the mortality from the disease has fallen steeply, i.e., the disease has become a mild one although its prevalence has not dropped appreciably.

The possibility exists, however, that, at some future date, the causative "germ" may become more virulent and the type

of disease increase in severity.

It is reported by many Authorities that the prevalence of Scarlet Fever is not greatly affected by a high Hospitalisation Rate. The modern trend is to encourage the treatment of cases of simple Scarlet Fever at home, where conditions are suitable. It is a routine practice in the Stafford Rural Area to remove to hospital all patients suffering from Scarlet Fever from households which have connection with the handling of milk supplies (Scarlet Fever can be milk-borne). An isolation of four weeks is ample for a case showing no complications but it is advisable that two more weeks should elapse before the individual returns to work, school or close contact with his fellows.

Diphtheria Immunisation.

The Council is responsible for the immunisation against Diphtheria of children between the ages of one and fifteen years in the Rural Area. Facilities are available for such immunisation in schools, welfare centres, etc., in the area.

The following table shows the Immunisation State of Children

in the area at the end of December, 1943:—

	Under 5 years.	5-15 years.	Total.
Number of children immunised against Diphtheria during 1943	219	63	2,82,
Estimated number of children in the Rural Area, December, 1943.	940	2,500	3,440
Percentage of children in the area immunised against Diphtheria at end of 1943	82%	84%	Average 83%

The various publicity campaigns conducted re Diphtheria Immunisation appear to have brought home to parents the fact that Diphtheria can be a deadly disease. The majority of mothers, nowadays, fortunately look upon Diphtheria Immunisation as a routine practice as soon as children reach the first birthday. It will be seen from the Age Incidence of Infectious Diseases for 1943 that there were no cases of Diphtheria among children under 15 years of age in the Stafford R.D.

Anthrax.—One case of Anthrax was found in a heifer beast during the year—all human contacts were examined and kept under supervision by the Health Department, and there was no extension of the disease.

Tuberculosis.

An extract from the Tuberculosis Register at the end of 1943 is given below. The figures in brackets show the numbers at the corresponding period in 1942.

Pulmonary			Non-Pulmonary			Total Pulmonary and Non-Pulmonary			
м.	F.	Total	М.	F.	Total	М.	F.	Total	
41 (41)	28 (26)	69 (67)	14 (13)	23 (23)	37 (36)	55 (54)	51 (49)	106 (103)	

The various Tuberculosis Services are controlled by the County Council. It has been estimated that rather less than 2 per cent. of all cases of Pulmonary Tuberculosis and about 30 per cent. of all cases of Non-Pulmonary Tuberculosis are attributable to the Bovine Type of infection. These figures are of interest in connection with the Government's proposals for improving the quality of the Nation's Milk Supply. The incidence of Bovine Tuberculosis also points to the importance of drinking only pasteurised or boiled milk, especially in children, as a precaution against any infection with Tuberculosis from this source. The provision of adequately heat-treated milk should be greatly increased by the Orders which the Minister of Food now has power to make scheduling areas in which only certain classes of milk may be sold by retail.

In July, 1943, the Government presented to Parliament a White Paper dealing with the measures proposed to improve the quality of the Nation's Milk Supply, and Statutory Legislation has since been introduced. The measures proposed included:—

(1) Transfer to Minister of Agriculture and Fisheries of the functions of Local Authorities relating to the conditions under which milk, including designated milk, is produced on the farm. This makes the Minister responsible for

- all matters relating to the production of milk, as, in 1938, responsibility for matters concerning the health of milk cows, etc., was transferred to him.
- (2) Measures to accelerate the production of Tuberculin-Tested Milk.
- (3) Local Authorities to retain their responsibilities re enforcement of existing statutory provisions relating to protection of milk against infection and contamination in milk depots and retail premises and during transport and distribution. Duties of Local Authorities will still include those relating to construction of retail premises, cleanliness of milk utensils, cleanliness of methods and of persons engaged in handling milk in such premises, etc. It is further stated that it is intended to ensure that milk consumed in schools will be either of the Heat-treated or T.T. type, ruling out the consumption of raw milk by children.

Many Local Authorities have expressed concern at the proposed removal of powers from Local Authorities. On the other hand it is considered that many Local Authorities have not the staff adequate in number for dealing effectively with duties under the Milk and Dairies Order. The production of a "clean" milk supply is, of course, of national concern, and it is necessary to enforce rigid standards in all details concerned with the production and distribution of milk.

In the past, Local Authorities have done much to improve conditions under which milk was produced, etc. Not so long ago when the Infant Mortality Rate was three and four times what it is to-day, Medical Practitioners and Medical Officers of Health were agreed that infected milk was to blame for a large part of this mortality. Investigations of some premises on which milk was produced showed intolerable conditions as regards premises and practices. To a considerable degree, due largely to the activities of Local Authorities, these evils have been mitigated.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER SUPPLY.

A table showing at a glance the water services to each Parish and relevant information is given on page 15.

It will be seen that approximately half of the houses in the Rural District have a piped water supply. The remainder rely on supplies from shallow wells and, in some cases, deep wells and springs. The quality and quantity of supply from these shallow wells and springs are frequently far from satisfactory.

Water Supply Services.

Pari	sh*_		No. of houses.	No. of houses with piped water supply.
Seighford Stowe Tixall Weston			160 331 82 208 145 176 425 68 48 124 47 569 147 180 81 36 44 77 66 97 290 261 49 108 52	30 (g) 331 (a) 201 (a) 145 (a) 361 (a) 68 (a) 28 (c) 90 (b) 81 (a) & (d) 36 (d) 44 (e) 11 (f) 29 (d) 45 (a) 40 (a) 30 (e)
Whitgreave **	• • •	• •	3,913	1,570

- (a) Stafford Borough Council Supply.
- (b) Supply gravitating from Spring at Audmore, Gnosall (R.D.C. Works).
- (c) Newport U.D.C.'s supply and the Aqualate Estate Co.s spring supply.
- (d) Shrewsbury Estate spring supply.
- (e) Staffordshire County Council Yarlet Bank supply.
- (f) Norbury Church Farm spring supply.
- (g) Knighton Factory Well Supply.

Western Area Water Scheme.—A request was made to the Ministry of Health during the year (November) for permission to continue with this Scheme for supplying piped water from the two 600 feet boreholes at The Hollies, Gnosall, to the large area comprising the nine parishes of Adbaston, Bradley, Church Eaton, Ellenhall, Forton, Gnosall, Haughton, High Offley, and Ranton. The Ministry, however, replied that the work could not go on due to the vital need to conserve labour and materials. Early this year, however, the Council, having serious regard to the unfit and short supplies of water to cottages and farms in the Central Western Area close to the existing boreholes, made particularly strong application to the Ministry for permission to proceed with a Curtailed Scheme covering the greater parts of the parishes of Gnosall and High Offley. More recently a supplementary request has been made for the inclusion of the parishes of Ranton and Ellenhall in this latter scheme. The result of the application is not yet to hand but a most justifiable hope is placed in this application being successful.

National Water Policy—White Paper.

The White Paper on a National Water Policy presented to Parliament in April, 1944, contains much of vital interest to the Stafford Rural District inhabitants. The Government proposes that £15,000,000 should be extended as assistance from the Exchequer towards extension of piped-water supplies and sewerage in Rural Areas of England and Wales. Recognised is the importance of the provision of wholesome water as a necessity of life and a defence against disease. The White Paper stresses the similar importance of adequate supplies of piped water for agricultural purposes if the highest degree of efficiency in agricultural production is to be achieved.

As regards Domestic Water Supplies in Rural Areas the prime objective is to ensure that as many houses as possible can readily be connected with a public main and obtain ample wholesome water for all needs. A further aim is the obtaining of corresponding sewerage developments. Recognised is the relatively high cost of laying the necessary mains and pipes in rural areas compared with the ability of Rural Ratepayers to meet such financial outlays. The proposed Exchequer Grant should alleviate such burdens.

The Government's proposals should therefore give impetus to Local Authorities planning water-supply and sewerage schemes for the benefit of people in rural areas. The Stafford Rural District Council will no doubt have a full programme of Post-war Housing, Water Supplies and Sewerage to carry out. In the past it is thought by many Authorities that there has been an unfortunate tendency to look upon Housing, Water-Supplies and Sewerage as

three separate problems. A well-built, suitably sited, architecturally-designed house requires provision of an ample supply of pure and wholesome water for all domestic purposes, together with sewerage arrangements consistent with modern Public Health standards.

If the projected Post-War Housing, Water and Sewerage Schemes are carried out with the enthusiasm which they merit, they should go a long way to obviating the country's insanitary rural dwellings drawing a water-supply from badly-constructed shallow wells into which seeps sewage from cess-pools, etc.

SEWERAGE AND SEWAGE DISPOSAL.

There are 605 houses in the Rural District served by public sewers and nine separate sewerage systems exist in the parishes of Berkswich, Castle Church, Church Eaton, Colwich, Creswell, Gnosall, and Weston.

Water closets are provided at almost all those houses served by public sewers and sewage works, but in the non-residential part of the district most houses are provided with pail or earth closets. The following table gives estimated figures for the whole area:—

Water closets ... 2,621
Pail closets ... 1,105
Earth closets ... 549

By far the greater number of houses in the area are separately drained to either small private cesspools or septic tanks with soakaways. Many of these chambers and tanks are built in ground which is of clay and water logged or which has become sewage soaked and complaints are frequently received. In many cases there is no real remedy other than the provision of public sewer and sewerage works.

The sewerage arrangements in the Walton area create a considerable problem. Here the nuisance is two-fold, i.e., due to the existing sewerage works at Green Gore Lane being inadequate and inefficient and to the difficulty in disposing of the effluent from the private septic tanks in the Village. The Council and its Officers have during the year made strenuous and continual efforts to remedy these conditions. Towards the end of 1943 formal application was made to the Ministry of Health for permission to carry out the necessary work to provide a new sewage disposal plant to the north of Green Gore Lane and to extend the sewer so as to serve Old Croft Road but the Ministry stated that the work could not be carried out during the emergency. A subsequent communication sent to the Ministry of Health by your Medical Officer of Health drawing the Ministry's attention to the seriousness of the conditions has resulted in further recent consideration of the matter by the Ministry.

REFUSE AND SALVAGE COLLECTION.

It is gratifying to report that very few complaints were received during the year of non-collection of refuse and it is established that the present method of collection by direct labour and the use of Council-owned vehicles is far more efficient than the method of collection by contract with private haulage firms, which latter system was in use up to 1941.

The number of vehicles now used is three refuse collecting vehicles and one salvage collecting van. Eight full-time men are engaged in collection and disposal together with two part-time men who are employed from time to time in tidying up the several tips.

Regular service is provided to 1,825 houses in the parishes in which the Council has undertaken the collection of house refuse. These parishes are Brocton, Berkswich, Castle Church (including Hyde Lea), Seighford, Colwich, Stowe (part of), Haughton, Creswell, Gnosall, Moreton, and part of Hopton.

The method of disposal (i.e., by tipping) and the control of the many tips throughout the area is as satisfactory as it is possible to be, having regard to the extremely large number of villages and tips in the rural district and the shortage of labour at the present time.

Particulars and weights of salvage materials collected during the year are given below:—

ž G				Ap	prox.	Val	ue.
	Tons	Cwts.	Qrs	· -	£	s.	d.
Clear Paper, Cardboard, etc.	 71	8	0		460	0	0
Rags and other textiles	 3	3	0		37	0	0
Black scrap	 11	9	0		25	12	6
Unflattened tins	 22	3	0		34	0	0
Bones	 2	0	0		5	2	6
Rubber	 4	9	0		10	0	0
Aluminium, Brass and Lead		1	2		2	7	6
,				1			
	114	13	2		£574	2	6

These figures are entirely satisfactory for a rural area. The Book Drive held 16th to 30th October, 1943, was a singular success, over 60,000 books being collected for Salvage, the Forces and Hospitals.

HOUSING.

New houses crected and buildings converted to houses during 1943:—

(a)	By the Local Authority	• •	• •	Nil.
(b)	By Private Enterprise			1

During the year the erection of 10 agricultural workers' cottages was commenced at Norbury (4), The Hanyards (2), and Great Haywood (4). These houses, which the Council could claim to be of the highest war-time quality, were completed and either occupied or ready for occupation at the time of going to Press.

Post-War Housing.—Work was commenced towards the end of the year of obtaining the necessary sites for the 76 permanent houses which the Council are to erect in their area after the War as their "first year's programme."

Inspection of Dwelling Houses during the year:—	
(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	572 598
(2) (a) Number of dwelling-houses (included under sub-heading (1) above) which were inspected	
and recorded under the Housing Consolidated Regulations, 1925	501 526
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	107
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading)	107
found not to be in all respects reasonably fit for human habitation	219
Remedy of defects during the year without service of i	formal
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local	
Authority or their Officers	53
Action under Statutory Powers during the year:—	
 (a) Proceedings under Housing Act, 1936	Nil. Nil.
undertaking not to use a dwelling for human habitation was accepted (Housing Act, 1936)	1
The foregoing report (sub-section 2 (a)) shows exprogress, despite staff shortage, in the survey of existing dw	

in the area. The parishes surveyed during the year were Haughton, High Offley, Hopton, Ingestre, Marston, Norbury, Ranton, Salt and Enson (total of 501 working-class houses). Of these, 92 houses

were found to require drastic treatment by Section 11 or 25 of the Housing Act, 1936. Detailed particulars of these 92 houses were obtained and filed.

It should be reported that the Third Report of the Rural Housing Sub-Committee of the Central Housing Advisory Committee which has just been published recommends, *inter alia*, a post-war survey of housing conditions in Rural Districts as early as possible. The form of the Survey to be carried out is almost identical to the survey already commenced by your Officers so that all the information required should be available well ahead of the date for which it is asked.

The following interesting facts and suggestions appear in the Sub-Committee's Report on Rural Housing Post-War Policy:—

(1.) Formation of Voluntary Joint County Committees to discuss all aspects of Rural Housing, including a thorough survey of rural housing with reasonable uniformity of standards.

(2.) The need for radical improvement of Rural Housing conditions after the war, together with large extensions of public services, such as Water, Sewerage,

Electricity and Gas.

(3.) Steps should be taken to ensure the proper representation of the housewives' point of view on Housing Committees of Local Authorities. The comment is made that slums exist in the country as well as in the town, and it is only the self-reliance of many country housewives which often enables them to overcome primitive housing conditions and to keep the interior presentable, thus masking the fundamental defects of the country slum.

(4.) An increased number of Sanitary Inspectors is required in Rural Districts. Adequacy of staff is the first problem to be solved by Rural District Councils before

embarking on a long-term housing programme.

(5.) Present powers and duties of Local Authorities should be extended to cover inspection of all dwelling-houses in the area, and not be limited to working-class houses. This would extend to the whole population the protection to health afforded by the Housing Acts.

(6.) More expeditious machinery for securing Rural Housing Sites, getting rid of handicaps under which Rural

District Councils labour at present.

(7.) The promotion of a happy balance between Agriculture and Industry in rural areas. The establishment of small industrial units in Rural Areas would increase

- the latter's financial resources and help directly towards better housing.
- (8.) Rural Areas have suffered most from the war-time suspension of building and slum clearance, as the improvement of Agricultural Housing was the last phase of the housing problem to be dealt with by the Government.
- (9.) The small, war-time housing scheme for 3,000 cottages spread over 377 rural districts has been of experimental value only, and not a serious contribution to agricultural needs. Shortage of houses in rural areas still remains acute and deterioration in existing property has become much worse in the war years, while the condition of many of the older cottages has fallen below the standards of hygiene, amenity and comfort which might reasonably be expected.

(10.) Speaking generally, the awakening of the "Housing Conscience" has been slower in Rural Areas than in the towns, and in the past there has been an attitude of complacency in housing matters found in a number of Rural District Councils with staffs too inadequate to carry out the heavy and continuous work of rural housing.

(11.) In some instances unduly low rents paid for cottages in rural areas contribute substantially to the bad state of repair of many of the old cottages, as 'the landlord receives insufficient to cover outlays on the proper care and attention to the buildings. The "tied" cottage is also regarded as an obstacle in many instances to improved agricultural housing.

(12.) Rural areas should have a fair share of available labour and materials for immediate post-war housing, to obviate the persistence of the relative inferiority of rural, particularly agricultural, housing.

(13.) Lack of suitable and adequate accommodation can deprive the countryside of the best of its youth. Bad housing is a major cause of de-population of areas.

(14.) Low standards of housing find acceptance in areas where there is little or no new housing. New houses bring the deficiences of old houses into prominence.

(15.) For at least five years after general building has been resumed there should be a special subsidy for houses built for agricultural workers, the subsidy to be such as to bridge the gap between the tenant's rent and the economic rent, and to be available for houses built by private persons as well as Local Authorities.

BYELAWS.

It is pleasing to report that, following further action taken at the end of 1943, the Council wlll soon have Building Byelaws in force in its area.

CANUTADA INCREMENTA O MATERIA DE A CALBUMA DE CAL	TITCIMO
SANITARY INSPECTION OF THE AREA.—SUMMARY OF	
Inspections of Houses for Defects (Housing Act)	•
Inspections of Premises for Nuisances	
Visits re Food Supply—Meat	
Ditto ditto —other Foods	18
Drainage Inspections	126
New Drains Laid	8
Cowsheds and Dairies	166
Factories	9
Canal Boats	2
Infectious Diseases	91
Visits re Water Supply	70
Samples of Water taken Chemical	23
Ditto Postoriological	23
C: ID (30
Council Houses Management	74
Salvage	90
Refuse Collection	169
Tents, Vans, and Sheds	8
Bakehouses	2
Knacker's Yards	15
Petroleum Stores	3
Rat Infestations	8
Miscellaneous visits and other visits in connection with	
Surveyor's duties	343
	2,078
Notices Served:	
Informal Notices and Letters	96
Statutory Notices	30
Statutory Notices	41
No. of Nuisances Remedied	
No. of Defective Dwellings rendered fit following service of	
Informal Notice or Letter	53
INSPECTION AND SUPERVISION OF FOOD.—Milk Supply	7 _
No. of Producers of Milk	636
No. of Producers (included in previous figure) of Ac-	000
aradited Mills	352
credited Milk	
Supplementary Licences granted to sell Pasteurised Milk	
Dealers' Licences granted to sell Tuberculin Tested Milk	1
Meat and other Foods.	
No. of Slaughterhouses licensed	1
No. of Knackers' Yards licensed	2
No. of men holding Licence to Slaughter	17
00	

Particulars of Food Inspection during the Year:—MEAT.

CARCASES INSPECTED AND CONDEMNED.

Horses.		479	6	4	2.7%			
Pigs.		, -						
Sheep	Lambs.	proved	[[
Calves.			[
Cows.		31	21	1	71%	ಸರ	[%1.91
Bovine Animals excluding	Cows.	بن	ಣ		%09	H		20%
		Number killed and inspected	Whole carcases condemned	Carcases of which some part or organ was condemned	% of number inspected affected with disease other than tuberculosis	Whole carcases condemned	Carcases of which some part or organ was condemned	% of number inspected affected with tuberculosis
Meat condemned due to Diseases other than tuberculosis. Meat condemned due to tuberculosis.						tuberculosis.		

The above animals were killed and examined at a Casualty Slaughterhouse in the area, which is the reason for the high percentage of Beef condemned.

Weight of Meat (excluding Horses) Condemned due to	:
(a) Tuberculosis 3,400 lbs.	
(b) Other Diseases or Conditions 11,915 lbs.	
	15,315 lbs.
Weight of Horseflesh Condemned	6,170 lbs.
Weight of other Foods Condemned :—	
(a) Tinned Foods 3,659 lbs.	
(b) Other miscellaneous Foods 265 lbs.	
	3,924 lbs.
Total weight of Food Condemned	25,409 lbs.

A. THOMSON,

Medical Officer of Health.

G. M. LAWTON,

Chief Sanitary Inspector.

